UNITED STATES

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
TEMPORARY

TEMPORARY FORM D OMB Number: 3235-0076
Expires: February 28, 2009
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hours per response. . . . 4.00

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

MAR 2 2009

Name of Offering (□ check Offering of Deferred Compe		dment and name has c ns – 2009 Enrollment	•	te change.)		THEND	Calmand Comment
Filing Under (Check box(es) t	hat apply):	□Rule 504	□Rule 505	⊠Rule 5	06 □ Sec	tion 4(6)	□ULOE
Type of Filing: ⊠New F	iling 🗆 Am	endment					
		A. BASIC	IDENTIFICATION	ON DATA			
1. Enter the information req	uested about the is	suer					
Name of Issuer (check if the Behringer Harvard Holding		nt and name has chang	ed, and indicate ch	ange.)			
Address of Executive Offices 15601 Dallas Parkway, Suite	e 600, Addison, Te		nd Street, City, Stat		phone Number 4) 655-1600		
Address of Principal Business (if different from Executive O Same	•	(Number ar	nd Street, City, Stat	e, Zip Code) Tele	phone Number	0	9001424
Brief Description of Business The Company is a holding of	ompany for all Be	hringer Harvard ope	rational entities.				
Type of Business Organization Graphical Corporation		rship, already formed		☑ other (pleas	se specify); limite	ed liability co	ompany
☐ business trust	☐ limited partne	rship, to be formed				•	
Actual or Estimated Date of In Jurisdiction of Incorporation of	•	(Enter two-letter (Month 1 2 U.S. Postal Service N for other foreign	abbreviation for S		□ Estimated	D E

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exception under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

	DACIC	IDENTI	FICATI	ION DATA	
A.	HASIC	TIDEN LI	ru Ali	ILIN DATA	

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years.
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	☐ Director	⊠ General and/or Managing Partner
Full Name (Last name first, if Behringer, Robert M.	individual)				
Business or Residence Addres 15601 Dallas Parkway, Suite	•				
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Aisner, Robert S.	individual)				
Business or Residence Addres 15601 Dallas Parkway, Suite		-			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Bresky, Gary S.	individual)				
Business or Residence Addres 15601 Dallas Parkway, Suite	•				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Mattox, M. Jason	individual)	·			
Business or Residence Addres 15601 Dallas Parkway, Suite			_		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Reihsen, III, Gerald J.	individual)			-	
Business or Residence Addres 15601 Dallas Parkway, Suite					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if Janet Holdings, LLC	individual)	<u></u>			
Business or Residence Addres 15601 Dallas Parkway, Suite					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and Si	reet, City, State, Zip Code)			
(Use blank sheet, or copy and	use additional cop	ies of this sheet, as necessa	ry.)		

BHH 2009 Enrollment Form D Filing

				B. IN	FORMATIC	N ABOUT	OFFERIN	G				
1. Has the iss	uer sold, or	does the issu	uer intend to	sell, to non	-accredited in	nvestors in t	his offering	?		•••••	Yes □	No ⊠
					endix, Colum	-						
2. What is the	minimum i	nvestment ti	hat will be a	ccepted fror	n any individ	lual?		***************************************		\$	N	/A
3. Does the o	ffering perm	it joint owne	ership of a si	ngle unit?		••••••••			•••••		Yes ⊠	No □
associated dealer. If	uneration fo person or ag	r solicitation ent of a brok ive (5) pers	of purchase er or dealer i ons to be lis	rs in connec egistered w	tion with sal	es of securit and/or with a	ies in the off	ering. If a pe es, list the na	erson to be list ame of the b	ted is an roker or		
Full Name (Las	st name first	, if individus	al)									
Business or Re	sidence Add	ress (Numbe	er and Street	, City, State	e, Zip Code)					<u>-</u>		
Name of Assoc	iated Broker	or Dealer										
States in Which	Person Lis	ted Has Soli	cited or Inte	nds to Solic	it Purchasers	3						
(Check "A	ll States" or	check indiv	idual States)		·····					•••••		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	{ SD }	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Las	st name first	, if individua	al)									
Business or Re	sidence Add	ress (Numb	er and Street	, City, State	e, Zip Code)							
Name of Assoc	iated Broker	or Dealer	-	· - 1 2.								
States in Which	Person Lis	ted Has Soli	cited or Inter	nds to Solic	it Purchasers							
(Check "A	II States" or	check indiv	ridual States)			•••••				•••••		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[iA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[Ml]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Las	st name first	, if individua	(اد								"	
Business or Re	sidence Add	ress (Numbe	er and Street	, City, State	e, Zip Code)					····	<u> </u>	<u> </u>
Name of Assoc	iated Broker	or Dealer				<u> </u>	<u>. </u>	<u> </u>				
States in Which	Person Lis	ted Has Soli	cited or Inter	nds to Solic	it Purchasers	· · · · · · · · · · · · · · · · · · ·						···
(Check "A	ll States" or	check indiv	idual States)	•					***************************************			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XX]	[UT]	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
(Use Blank She	et, or copy a	ınd use addi	itional copies	of this she	et, as necessa	ary.)						

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Aggregate Type of Security Offering Price Already Sold \$ Debt _______\$ 0 ☐ Common ☐ Preferred Convertible Securities (including warrants)......\$ 0 Partnership Interests\$ 0.5 n \$ 1,560,335.24 (1) \$ Other (Specify Deferred Compensation Obligations) 1,560,335.24 Ð Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate **Dollar Amount** Number of Purchases Investors Accredited Investors. 20 1,560,335.24 Non-accredited Investors..... 0 \$ 0 Total (for filings under Rule 504 only)..... 0 \$ 0 Answer also in Appendix, Column 3, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information required for all securities sold by the issuer, to date, in offering of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Type of offering Security Sold Rule 505 N/A Regulation A..... N/A \$ Rule 504 N/A \$ Total N/A \$ 0 Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... □ \$ 0 Printing and Engraving Costs.... □ \$ 0 □ \$ Legal Fees 0

(1) The maximum number of deferred compensation obligations to be issued is based on a percentage of each investor's anticipated commissions and, accordingly, is an estimate rather than an exact number.

Accounting Fees.....

Engineering Fees

Sales Commissions (specify finders' fees separately)

Other Expenses (identify).....

Total

0

0

0

0

Û

□ \$

□ \$

□ \$

	Enter the difference between the aggregate offering price given in response to F total expenses furnished in response to Part C - Question 4.a. This difference is to exceeds to the issuer."	he "adjusted gross				\$	1,560,335.24
of t to t	licate below the amount of the adjusted gross proceeds to the issuer used or propose the purposes shown. If the amount for any purpose is not known, furnish an estimathe left of the estimate. The total of the payments listed must equal the adjusted guer set forth in response to Part C - Question 4.b above.	te and check the box					
				Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		\$_	0	. [] \$	0
	Purchase of real estate		\$_	0		3	0
	Purchase, rental or leasing and installation of machinery and equipment	C	\$	0) \$	0
	Construction or leasing of plant buildings and facilities		\$	0		3	0
	Acquisition of other businesses (including the value of securities involved in thi may be used in exchange for the assets or securities of another issue pursuant		_			1 .	
			~ -	0	•	J	
	Repayment of indebtedness		\$_		. [] \$	
	Working capital		\$_	0		3	0
	Other (specify) The gross proceeds will be deposited in a "rabbi trust" in connection with the issuer's deferred compensation plan; any proceeds not pla into trust will be used for working capital purposes		•	0] ç	1,560,335.24
	* * * *		-			_	
	Column Totals		\$	0		J \$	1,560,335.24
	Total Payments Listed (column totals added)			□ s 	1,5	60,33	35,24
	D. FEDERAL SIGNA	TURE					
consti	ssuer has duly caused this notice to be signed by the undersigned duly authorized itutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange C suer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.						
Issuer	(Print or Type) Signature			C	ate		<u> </u>
Behri	inger Harvard Holdings, LLC		_			2/	3/09
Name	of Signer (Print or Type) Title of Signer (Print or	Туре)				7	
Geral	ld J. Reihsen, III Executive Vice Presid	ent – Corporate D	evelo	pment & Legal			
	ATTENTION Intentional misstatements or omissions of fact constitute fede	ral criminal violat	ions.	(See 18 U.S.C.	100)1.)	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

E. STATE SIGNATURE		
 Is any party described in 17 CEP 220-262 presently subject to any of the disqualification provisions of such rule?	Vor	No

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Behringer Harvard Holdings, LLC		2/3/09
Name of Signer (Print or Type)	Fitle of Signer (Print or Type)	
Gerald J. Reihsen, III	Executive Vice President - Corporate Development & Leg	al

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Ø

				APPENDI	х				
1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited investors	Accredited Non-Accredited				No
AL				,					
AK						<u> </u>			
AZ									
AR									
CA		х	Deferred Compensation Obligations	2	\$158,723.75	0	0		х
со		х	Deferred Compensation Obligations	1	\$94,562.32	0	0		х
СТ								****	
DE						1-			
DC									
FL		х	Deferred Compensation Obligations	2	\$116,222.72	0	0		х
GA									
НІ									
ID									
IL		х	Deferred Compensation Obligations	ı	\$43,431.24	0	0		х
IN									
IA									
KS		х	Deferred Compensation Obligations	l	\$189,121.53	0	0		х
KY .									
LA									
ME					<u> </u>			<u> </u>	
MD									
МА		х	Deferred Compensation Obligations	1	\$17,978.56	0	0		x
МІ			<u> </u>						
MN									
MS									

				APPENDI	X				
1	Intend to non-accinvestors (Part B-I	to sell credited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited investors	Accredited Non-Accredited				
мо									
МТ									
NE									
NV									
NH									
l		х	Deferred Compensation Obligations	1	\$58,925.30	0	0		х
NM									
NY		х	Deferred Compensation Obligations	1	\$38,686.93	0	0		х
NC		х	Deferred Compensation Obligations	1	\$51,361.60	0	0		х
ND									
он		х	Deferred Compensation Obligations	l	\$161,058.76	0	0		х
ок									
OR									
PA									
RI									
sc									
SD									
TN									
тх		х	Deferred Compensation Obligations	8	\$630,262.53	0	0		х
ហ									
VT									
VA									
WA									
wv									

		•		APPENDI	X				
1	to non- investo	d to sell accredited rs State 3-ltem 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inve amount purchas (Part C-Ite	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
wı									
WY									
PR									

